File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM **DISCLOSURE SUMMARY PAGE**



COMMITTEE NAME (Must be same as on Statement of Org	anization)			5.02
Communications Workers of America	·	1 1	FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cand Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	2)State PAC (3)State Party	cal AC (Fo	DR-2 lev. 07/2007) or Office Use Only	DISCLOSURE REPORT
CANDIDATE COMMITTEES ONLY:			gged In	CP UI 1
Candidate Name	Political Party (if applicable)	1 1		
000		1 1		
Office Sought	District (if Senate or House)		dited	VI-1994
Late resports are subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties. Professional penalties of the subject to possible civil and criminal penalties.	ursuant to lowa Code sections 68B.3 515 243 7102 TELEPHONE	2A(7) and 68	A.401(3), the can May 15t DATE SIG	<u>:h 200</u> 8
			DATEON	JILL
AM FILING A Jan 1 thru May 14th 2008	REPORT FOR (1) ELECTION	N /(2)NON-E	ELECTION YEA	R.
(report date)	Indicate b	y # 2		
CHECK IF AMENDMENT TO REPORT DATED		Local Comr	nittees, enter Date	e of Election
			,	
Chook if this is final (termination) remark and attack Netter	- (D)	1		
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed	of Dissolution Form DR-3. d.)	County & Lower County	ocal Committees, ion is held	enter County in
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed STATEMENT OF CASH ON HAN	d.)	County & Lowhich Elect	ocal Committees, ion is held	enter County in
(You must continue to file reports until a DR-3 is filed	d.) D	County & L which Elect	ocal Committees, ion is held	enter County in
(You must continue to file reports until a DR-3 is filed	D otal of all funds held by the cash on hand at the end	which Elect	ion is held	
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STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is f ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule Schedule H: Total Sales of Campaign Property (Attach Schedule H applies to Candidates' Committee Subtract Total Money Spent This Period	D otal of all funds held by the cash on hand at the end first report filed.) dule A) (*also see in-kind below) ach Schedule H) smittees Only) SUB-TOTAL O) (**also see debts and loans below	which Elect	11,500 2,000 13,500	0.75 0.00
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STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is f ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule F: Loans Received total (Attach Schedule H: Total Sales of Campaign Property (Attach Schedule H: Total Sales of Campaign Property (Attach Schedule H: Applies to Candidates' Com SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B)	Dotal of all funds held by the cash on hand at the end first report filed.) dule A) (*also see in-kind below) ach Schedule H)	which Elect	11,500 2,000 13,500 320	0.75 0.00 0.75 0.00

For Instructions, Se	e Back of Form
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Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)					
Communications	Workers	of	America	Local	7102 ID6019

I	SCHEDULE				
	A (Rev. 07/03)	MONETARY RECEIPTS			
	CHECK THIS BOX IF AMENDING FORM				

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FÖR FUND- RAISER INCOME
1-31-08	ID# CK#	Direct Deposit to Bankers Trust non/int ckg member dues		\$ 500.00	
2-29-08	ID# CK#	11 11		500.00	
3-31-08	ID# CK#	11		500.00	
4-30-08	ID# CK#	11 11		500.00	
	ID# CK#				
			SUB-TOTAL		

TOTAL (if last page of this schedule)

Page 1 of 1 (for Schedule A)

\$2000.00

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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3000000	AND 1884	888 AFA	3 A 4 5 3 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
2000000		380.385		

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF ENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Communications Workers of America Local 7102 ID6019

DATE EXPENDED (MM/DD/YR) CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER		NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED	
4-11-08	ID# CK# 637	Ia Fed of Labor 2000 Walker DM IA 50317	Regis Cope Conv	\$ 120.00	
4/11/08	ID# CK# 638	Polk Cty Demo Party 5661 Fleur Drive Des Moines IA 50321	Spring Fund Raiser	200.00	
	ID# CK#				
	ID# CK#				
	ID#				
	ID#				
	ID#				
	CK#				
	CK#		SUB-TOTAL	 	
			TOTAL (if last page of this schedule)	\$ 320.00	

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	1	of	1	
Page	1	of _		